

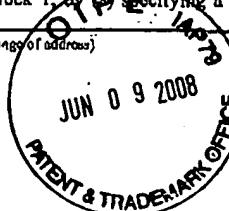
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE**TOTAL PAGES FAXED:** 2Commissioner for Patents  
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24498 7590 05/12/2008  
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 06/10/2008 WABDEL3 00000105 070832 10523181  
 01 FC:1501 1440.00 DA  
 02 FC:1504 300.00 DA  
 03 **APPLN. NO.** 10/523.181 **FILING DATE** 01/28/2005 **FIRST NAMED INVENTOR** Didier Velez **ATTORNEY DOCKET NO.** PU020358 **CONFIRMATION NO.** 1139



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

<b>Patricia M. Fedorowycz</b> <i>Patricia M. Fedorowycz</i> June 9, 2008	(Depositor's name) (Signature) (Date)
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**TITLE OF INVENTION:** PACKET PROCESSING ARCHITECTURE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	08/12/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
PATEL, ASHOKKUMAR B	2154	709-221000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). (SEE ADDRESS CHANGE ABOVE) <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	2. For printing on the patent front page, list <input type="checkbox"/> the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<b>1 JOSEPH J. LAKS</b> <b>2 ROBERT D. SHEDD</b> <b>3 REITSENG LIN</b>	

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Thomson Licensing

Boulogne-Billancourt, FRANCE

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

## 4a. The following fee(s) are submitted:

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 Publication Fee (No small entity discount permitted)  
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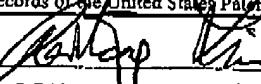
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A check is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 07-0832 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature 

Date 6/11/08

Typed or printed name REITSENG LIN (609) 734-6813

Registration No. 42,804

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